

Girls Against Meth: A Prevention Curriculum

Executive Summary

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Abstract

This study focused on identifying the risk and protective factors associated with women and methamphetamine use. Also, reasons for using methamphetamine were explored. Upon discovering the motives and potential influences to use or remain abstinent, a prevention curriculum was created for girls ages 12-18. Results yield adolescents girls with an unstructured home environment; low school attainment, depression, and low self-esteem were more at-risk. Causes for use included increased energy, enhanced self-confidence, escape from negative feelings, and weight loss.

Problem Statement

For years drug use has been a social problem in America, the topic on how abuse and dependence evolves, and the damages it causes to the individual, family and wider community have been well documented, ranging from health hazards, employment/academic interference, economic costs, legal consequences, family discord, etc.(Velleman, Templeton & Copello, 2005). Numerous studies have focused on treatment efforts to help individuals recover from addiction, however, recently the emphasis has been on preventing use in order to decrease the probability of all the possible consequences attached to dependency (Hilarski, 2005). Current research shows initiation of drug experimentation occurs in early adolescence; ages 11 to14 (The National Center on Addiction and Substance Abuse, 2003).

Historically, drug use was more common in males, with alcohol and marijuana being the preferred drug of choice among youth, but recent studies have pointed to the rise of methamphetamine use among adolescents (Drug Enforcement Agency, 2007). In 2002, California Department of Alcohol and Drug Programs (2006) made a public announcement regarding the dangers of methamphetamine use, prevalence among young adults, and calling it an American health epidemic. In response to the

methamphetamine epidemic, the Los Angeles County Board of Supervisors assigned certain social service agencies to research the risk features and protective factors found among young women (ages 12-17) who use methamphetamine, and formulate a prevention plan. This project focused on identifying the underlying dangers associated with young female drug use and develop an 11 week prevention curriculum to avert these risks. The prevention curriculum sessions focus on positive aspects of adolescent life that prevents substance abuse features. Social Learning Theory, Family Systems Theory and Self-Esteem Theories were used to support the practices in the curriculum.

Literature Review

Methamphetamine is categorized as a central nervous stimulant that enhances bodily functions. Methamphetamine is a Schedule II stimulant, which means it has a high potential for dependency and is only legally available through prescription (Morimasa & Wirz-Justice, 2001). Routes of administration consist of smoking, intranasal, or injection (add water). Immediate results after consumption include increased wakefulness, increased physical activity, elevated heart rate, increased respiration, decreased appetite, enhanced self-confidence, and feelings of euphoria (California Department of Alcohol and Drug Programs 2006).

Drug use among youth is a complex problem that dates back decades. Scientists assert there is no single risk factor causing use; it is a combination of mental illnesses, family structure, victimization, school achievement, and peer surroundings. McCrystal, Higgins & Percy (2005) warned, the more children are exposed to the risk factors, the greater the chance of developing a drug problem.

Mental Health

Hilarski's 2005 study found depression was more common among substance abusing teen girls than boys. In conjunction, Pebbles-Wilkins (2006) also reported depression, accompanied by low self-esteem and lack of confidence was present in teen girls who used drugs. McCrystal et al. (2005)

reported self-concept for girls was important particularly to physical image, such as body weight and dieting. Some youth turned to drugs that facilitated weight loss, which in turn improved their self-esteem. Interestingly, women who consumed methamphetamine reported obtaining enhanced self-confidence, increased energy, weight loss, suppressed appetite, and relief from depression. During a stressful or depressed mood, women reported using methamphetamine to escape or cope with the situations (Semple, Grant & Patterson, 2004).

Family Functioning

One cannot ignore the primary caregiver relationship and home environment when discussing drug use and adolescence. Just as researchers point to mental health as a contributing feature, family structure has a direct effect and even a greater determinant of chemical use than any other risk factor (Velleman, Lorna, Templeton, & Copello, 2005). Velleman et al. report quality of parenting has been found to interact with child variables, such as psychological well-being, stress, social support, anti-social behavior, and drug use. Chaotic home environments consisting of unpredictable rules, consequences and schedules, lack of mutual attachment, and ineffective parenting were shown to be strong predictors of drug use. The researchers found that lack of structure, low family cohesion, high family conflict, episodes of abandonment, inconsistent discipline, passive parenting, poorly defined expectations, lack of communication and drug use among parents were found to predict drug use among children.

Victimization

Research shows female victims to sexual abuse were more likely than boys to develop a drug problem. Ramlow, White, Watson, and Leukefeld's (1997) study, documented a high level of incest in female substance abusers. Exposure to violence also contributed to the search for drug experimentation (The

National Center on Addiction and Substance Abuse, 2003). Traumatic events may manifest in an array of rebellious behaviors, including the use of substances.

Peers/School

Although parents have a significant impact on youth substance abuse, peers are the next greatest influence. Research shows most girls are introduced to drugs by friends or boyfriends. Children who choose to interact with youth who use substances, commit crimes, or have conduct/oppositional disorder are prone to try drugs than those who choose to associate with positive peers (McCrystal, Higgins and Percy, 2005; National Institute on Drug Abuse, 2003; Amaro, Blake, Schwartz & Flinchbaugh, 2001). Another risk factor is academic failure. Research showed children disconnected from school success, receiving poor grades, and truant from school were found to be associated with drug use (Corrigan, Loneck, Videka, & Brown, 2007).

Research Design

To understand why women select methamphetamine, attention was given to the current research published in academic journals, scholarly institutions, and reputable websites. Data were collected solely from existing literature. It was hypothesized that young girls more inclined to drug consumption come from homes where structure and consequences were absent, where they were exposed to parental substance abuse, received poor grades, and possessed feelings of inadequacy. Thus, extensive research was conducted on analyzing the mental health, family structure, school performance, peer selection, and victimization of young women.

Next, protective factors that were shown to deter substance use were examined. Women who were raised in environments with predictable limits, consistent parenting, positive role models, consequences for actions, recognition, and praise were less apt to participate in drug use. This was hypothesized to have elevated their self-esteem and witness adequate problem-solving skills. Women

who were employed or received an education were prone to derail from use. Another important factor was to study the nature of methamphetamine. Therefore, the aim was to understand the physiological and psychological consequences of methamphetamine, history, the common characteristics of people who use the drug, and the prevalence among young people. Once that was identified, the next step was to examine certain environmental variables that closely relate to substance use and compare those to key aspects that deter consumption. This provides insight to the needs of young women, which is a vital discussion being addressed. Finally, psychological theories were researched to explain the risk and protective characteristics and provide a guide to the formation of the curriculum.

Results

Five categories emerged from the literature that either protected youth against or initiated the onset of methamphetamine. They were: mental health, family structure, victimization, school performance, and peer selection. The mental health arena showed women who battled with depression were at greater risk of developing a substance abuse problem. For young girls, self-esteem was a significant indicator to drug participation. Those females feeling inadequate about their skills or appearance were more likely to seek a substance that could mask their inner turmoil. Thus, experts suggest prevention with females demands the use of self-esteem building, adequate coping skills, and body image coaching.

Perhaps the most important predictor is the quality of parenting practices. Considerable studies examined the family dynamics of girls who use illicit drugs and striking similarities were found. Parents who rarely supervised activities, had inconsistent rules, inadequate enforcement techniques, used drugs, and had a strained relationship with their children placed greater risk on their offspring to seek drugs. On the other hand, research showed families that created predictable and steady limits, refrained from drug consumption, and closely monitored youth events derailed use. Researchers

recommended any treatment of prevention efforts needed to include parent participation and teach them how to set boundaries and have a disciplinary plan to enforce consequences.

Another important determinant of future drug use was victimization. Girls who were assaulted, sexually abused, or witnessed a traumatic event during early childhood were considerably inclined to use drugs at a later age. In regards to school and peer selection, research found youth involved with drug use exhibited poor school performance. Often homework was neglected, grades decreased, and there was minimal value placed on education. Studies also revealed the further youth engaged in drug use, the greater risk for dropping out. Contrary, those students with high academic achievement were less likely to experiment with substances. Providing youth the skills needed to receive passing grades and informing them of the opportunities available for completing their education. Based on the recommendations of the literature review of protective features, the topic of the curriculum are as follows:

Curriculum Outline

Girls

Session 1. Facts about meth (parents included)

Session 2. Resistance

Session 3. Self-Esteem

Session 4. Coping & Support

Session 5. School Success

Session 6. Weight Loss

Parents

Session 7. Setting Rules and Enforcing Consequences

Session 8. Communication

Session 9. Praising

Session 10. Role Modeling Desired Behavior

Session 11. Youth & Parent Final Summary

Discussion

The paradigm that received the majority support from the research on the characteristics of drug use was Family Systems. Because the common theme in adolescent substance abuse revolves around the quality of family relationships, it was vital to use the theory's concepts and include recommendations for improving the dynamics of parent-daughter interactions. Those families with a breakdown in communication, attachment, and hierarchy structure were predicted to be at higher risk than those who displayed a more cohesive controlled atmosphere. One down side is the limited time frame to practice the skills and receive feedback from the parents. Another thing to note is that the youth portion of the curriculum does not focus on modifying the family system by improving communication with parents, or following rules, or bonding with parents. Rather, the objective is to provide them with refusal skills when confronted with drug offers and to protect their self-esteem from the criticism of others. Another theory that explains why drugs emerge during this life stage is Social Learning. What is significant about this perspective is that it asserts if youth learn certain deviant behaviors, they can also learn more adaptable skills. Unfortunately the youth do not have sufficient time to practice the skills and prepare for uncontrollable events. The research pointed to the importance of practicing resistance skills, coping mechanisms, and self-esteem building. For the most part there was limited research on why female adolescents select methamphetamine as a primary choice.

Lastly, the theories of self-esteem posit that youth not validated for their positive efforts turn to deviant acts to receive some form of recognition. Usually people with low self-worth have an empty feeling that drives the person to fill the void. While this may explain why some female youth with fragile self-perceptions turn to substances, it does not explain why some engage in consumption despite higher levels of self-worth and coming from enact families. Although highlighted in the

literature review, victimization is ignored in the project. Another limitation is that a measurement instrument has not been created to test the project's efficiency.

Future projects should consider expanding the time frame allotted to the sessions so that it allows for practice and feedback. Also, more parent-child sessions should be combined to facilitate an easier transition. The issue of victimization and how to avoid it and receive treatment should also be addressed. Another step can be to create a participant manual to incorporate writing activities and literature on how the topics presented in group. To end, extensive research needs to be conducted on why teen girls incline towards methamphetamine.

Policy Implications

Because substance abuse is a widely publicized problem, more prevention efforts need to be conducted at elementary, middle, and high schools. Not only should students be advised of the danger of drug use, but parents need to be a part of that discussion and the process. Social workers can advocate to school/local legislators on the importance of *ongoing*, not temporary, prevention programs and the inclusion of caregiver membership. Recently the push in social services has shifted to prevention, but efforts are still in infancy.

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